

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Saeko KURACHI

Group Art Unit: 1725

Application No.: 10/086,806

Examiner:

C. Ildebrando

Filed: March 4, 2002

Docket No.: 111204

For:

CARBON MONOXIDE SELECTIVE OXIDIZING CATALYST AND

MANUFACTURING METHOD FOR THE SAME

AMENDMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In reply to the February 25, 2004 Office Action, please consider the following:

Amendments to the Claims as reflected in the listing of claims; and

Remarks.

FEE VALUE 172.

15/27/2004 MMEKONEN 00000124 10086806

1 FC:1201 2 FC:1202

86.00 OP 18.00 OP

OLIFF & BERRIDGE, PLC P.O. Box 19928

Alexandria, Virginia 22320 Telephone: (703) 836-6400 Facsimile: (703) 836-2787



PATENT APPLICATION

Attorney Docket No.: _111204

C. Ildebrando

AMENDMENT TRANSMITTAL

Group Art Unit: 1725

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Saeko KURACHI

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CARBON MONOXIDE SELECTIVE OXIDIZING CATALYST AND MANUFACTURING METHOD

FOR THE SAME

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

Entitlement to small entity status is hereby asserted.

Small entity status of this application has been established.

The filing fee has been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)		
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		
TOTAL CLAIMS	41 MINUS	**40	=1		
INDEP CLAIMS	€MINUS 7	***5	=+ 2-		
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					

	SMALL ENTITY				
	RATE	ADD'L FEE	c		
	x 9	\$			
	x 43	S			
	+145	\$,		
,		\$			

OTHER THAN A SMALL ENTITY					

- If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Check No. 154432 in the amount of \$104.00 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

James A. Oliff

Registration No. 27,075

Julie M. Seaman Registration No. 51,156

JAO:JMS/brc

Date: May 25, 2004